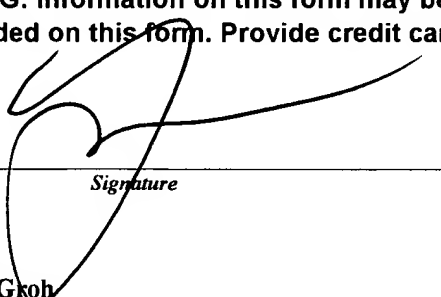
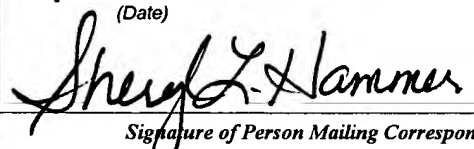
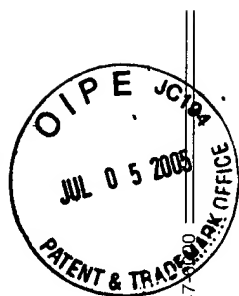


en 2613

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>FNI-01503/03</b>	
Applicant(s): <b>Washino et al</b>					
Application No. <b>09/301,656</b>	Filing Date <b>04/28/1999</b>	Examiner <b>Diep</b>	Customer No. <b>25006</b>	Group Art Unit <b>2613</b>	Confirmation No. <b>5893</b>
<div style="display: flex; align-items: center;"> <div style="border: 1px solid black; border-radius: 50%; padding: 10px; text-align: center; margin-right: 10px;"> <b>TYPE</b>  <b>JUL 05 2005</b>  <b>PATENT &amp; TRADEMARK OFFICE</b> </div> <div> <b>Attention: VIDEO MONITORING AND CONFERENCING SYSTEM</b> </div> </div>					
<b>COMMISSIONER FOR PATENTS:</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	74 -	74 =	0	x \$50.00	\$0.00
INDEP. CLAIMS	11 -	11 =	0	x \$200.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>07-1180</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.					
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>					
 _____ <i>Signature</i>			Dated: <b>June 30, 2005</b>		
<b>John G. Posa</b> <b>Reg. No. 37,424</b> <b>Gifford, Krass, Grah</b> <b>PO Box 7021</b> <b>Troy, MI 48007</b> <b>Tel. 734/913-9300</b>			<div style="border: 1px solid black; padding: 5px;">         I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on  <div style="text-align: center;"> <b>7-1-05</b>            _____            (Date)         </div> <div style="text-align: center;">             _____  <i>Signature of Person Mailing Correspondence</i> </div> <div style="text-align: center;"> <b>Sheryl L. Hammer</b>            _____  <i>Typed or Printed Name of Person Mailing Correspondence</i> </div> </div>		
CC:					



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Washino et al.

Serial No.: 09/301,656

Group No.: 2613

Filed: April 28, 1999

Examiner: Diep

For: VIDEO MONITORING AND CONFERENCING SYSTEM

AMENDMENT

Mail Stop AMENDMENT  
Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed April 1, 2005, please amend the above-referenced reissue application as follows:

(248) 647-7021 TROY, MICHIGAN 48007-7021  
GIFFORD, KRASS, GROH, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 2701 TROY CENTER DR., SUITE 330, P.O. BOX 7021